

County: La Crosse
LAKEVIEW HEALTH CENTER
902 EAST GARLAND STREET

Facility ID: 5100

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WEST SALEM 54669 Phone: (608) 786-1400

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/00): 165

Total Licensed Bed Capacity (12/31/00): 191

Number of Residents on 12/31/00: 147

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? No

Average Daily Census:

County

Skilled

No

No

153

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		26.5
Supp. Home Care-Personal Care	No					1 - 4 Years		29.9
Supp. Home Care-Household Services	No	Developmental Disabilities	0.7	Under 65	31.3	More Than 4 Years		43.5
Day Services	No	Mental Illness (Org./Psy)	47.6	65 - 74	26.5			-----
Respite Care	No	Mental Illness (Other)	44.2	75 - 84	21.1			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.7	85 - 94	20.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.7	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	0.7		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)		
Other Meals	No	Cardiovascular	0.7	65 & Over	68.7	-----		
Transportation	No	Cerebrovascular	0.0		-----	RNs		12.8
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		6.2
Other Services	No	Respiratory	0.0		-----	Nursing Assistants		
Provide Day Programming for Mentally Ill	Yes	Other Medical Conditions	5.4	Male	51.7	Aides & Orderlies		37.4
Provide Day Programming for Developmentally Disabled	Yes		100.0	Female	48.3			

					100.0			

Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Managed Care			Percent Of All Residents	
	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem	No.	%	Per Diem		Total
			Rate			Rate			Rate			Rate			Rate		
Int. Skilled Care	0	0.0	\$0.00	6	4.6	\$116.48	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	6	4.1%
Skilled Care	0	0.0	\$0.00	71	54.6	\$98.85	1	100.0	\$113.00	12	75.0	\$113.00	0	0.0	\$0.00	84	57.1%
Intermediate	---	---	---	48	36.9	\$81.22	0	0.0	\$0.00	4	25.0	\$105.00	0	0.0	\$0.00	52	35.4%
Limited Care	---	---	---	2	1.5	\$69.46	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	1.4%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	3	2.3	\$128.24	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	3	2.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		130	100.0		1	100.0		16	100.0		0	0.0		147	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
				% Needing Assistance of	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	% Independent	One Or Two Staff		
Private Home/No Home Health	0.0	Daily Living (ADL)				
Private Home/With Home Health	0.0	Bathing	12.9	49.7	37.4	147
Other Nursing Homes	1.9	Dressing	26.5	44.2	29.3	147
Acute Care Hospitals	25.9	Transferring	59.9	27.9	12.2	147
Psych. Hosp. -MR/DD Facilities	63.0	Toilet Use	40.8	31.3	27.9	147
Rehabilitation Hospitals	1.9	Eating	42.2	46.3	11.6	147
Other Locations	7.4	*****				
Total Number of Admissions	54	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	2.0	Receiving Respiratory Care		2.0
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	46.3	Receiving Tracheostomy Care		0.7
Private Home/With Home Health	3.4	Occ/Freq. Incontinent of Bowel	31.3	Receiving Suctioning		0.0
Other Nursing Homes	5.2			Receiving Ostomy Care		1.4
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		2.7
Psych. Hosp. -MR/DD Facilities	3.4	Physically Restrained	3.4	Receiving Mechanically Altered Diets		9.5
Rehabilitation Hospitals	0.0					
Other Locations	8.6	Skin Care		Other Resident Characteristics		
Deaths	79.3	With Pressure Sores	4.8	Have Advance Directives		82.3
Total Number of Discharges		With Rashes	10.2	Medications		
(Including Deaths)	58			Receiving Psychoactive Drugs		75.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	Ownership:			Bed Size:		Licensure:		All	
	This Facility			100- 199		Skilled		Facilities	
	%	Peer Group	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	80.1	82.7	0.97	83.6	0.96	84.1	0.95	84.5	0.95
Current Residents from In-County	54.4	85.7	0.64	86.1	0.63	83.5	0.65	77.5	0.70
Admissions from In-County, Still Residing	40.7	34.4	1.18	22.5	1.81	22.9	1.78	21.5	1.89
Admissions/Average Daily Census	35.3	67.7	0.52	144.6	0.24	134.3	0.26	124.3	0.28
Discharges/Average Daily Census	37.9	72.5	0.52	146.1	0.26	135.6	0.28	126.1	0.30
Discharges To Private Residence/Average Daily Census	1.3	23.7	0.06	56.1	0.02	53.6	0.02	49.9	0.03
Residents Receiving Skilled Care	61.2	83.9	0.73	91.5	0.67	90.1	0.68	83.3	0.73
Residents Aged 65 and Older	68.7	83.5	0.82	92.9	0.74	92.7	0.74	87.7	0.78
Title 19 (Medicaid) Funded Residents	88.4	77.2	1.15	63.9	1.38	63.5	1.39	69.0	1.28
Private Pay Funded Residents	10.9	17.9	0.61	24.5	0.45	27.0	0.40	22.6	0.48
Developmentally Disabled Residents	0.7	3.4	0.20	0.8	0.83	1.3	0.54	7.6	0.09
Mentally Ill Residents	91.8	56.6	1.62	36.0	2.55	37.3	2.46	33.3	2.75
General Medical Service Residents	5.4	14.3	0.38	21.1	0.26	19.2	0.28	18.4	0.30
Impaired ADL (Mean)	43.8	50.8	0.86	50.5	0.87	49.7	0.88	49.4	0.89
Psychological Problems	75.5	61.2	1.23	49.4	1.53	50.7	1.49	50.1	1.51
Nursing Care Required (Mean)	3.9	6.6	0.59	6.2	0.63	6.4	0.61	7.2	0.55